

# 1998

## FORM 1-ES

### WISCONSIN ESTIMATED TAX VOUCHER

File only if submitting payment.  
Make your check payable to and mail your voucher to:  
Wisconsin Department of Revenue  
Post Office Box 2942  
Milwaukee, WI 53201-2942

Calendar year due dates:		Fiscal year filers:
Apr 15, 1998	Sep 15, 1998	Enter year ending _____ (month and year)
Jun 15, 1998	Jan 19, 1999	

☐ Check box if address changed and new address was not provided on a prior payment voucher

Your last name	Your first name and initial	Your social security number
Spouse's last name	Spouse's first name and initial	Spouse's social security number
Home address (number and street or rural route)		Telephone number
City or post office		State      Zip code

- Check the boxes below which apply to you
- ☐ Trust (Enter FEIN as "your social security number")
- ☐ Estate (Enter decedent's social security number)
- ☐ Individual (or Joint)
- ☐ Extension or Electronic Return Payment

AMOUNT OF PAYMENT \$ \_\_\_\_\_  
Please do not staple your payment to this voucher

D-101

2942 9999999999 9999999999 3 99998 1998 8

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